



Department of
the Secretary of State
Bureau of Motor Vehicles

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Secretary of State

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**Notice of Loss Dealer Plates and Request for New Plates
(Fee: Each Plate \$5.00 ~ With Validation Stickers \$5.50)**

Name of Dealership: _____

Address: _____

Dealer License Type & Number: _____ **AND** Letter of Plate _____

Do you want the plate replaced: ___Yes ___ No Stickers Needed: ___Yes ___ No

I hereby request a duplicate dealer plate for the dealership described above. I certify that the original plate was:

- _____ Lost
- _____ Stolen
- _____ Mutilated (i.e. bent, faded, etc.)

Signature: _____ Date: _____

Phone Number: _____ Fax Number: _____

Email Address: _____

I request that the fees be paid by credit card bearing the following information:

_____ VISA or MasterCard _____

Credit Card Number: _____

Expiration Date: _____

Name on Credit Card: _____

Return To: Bureau of Motor Vehicles, Attn: Dealer Section, 29 State House Station,
Augusta, ME 04333

Telephone: (207) 624-9000 Ext. 52143 **Fax:** (207) 624-9037

For BMV Use

New Plate Issued: _____ **New Sticker Issued:** _____

Date Issued: _____ **Issued By:** _____